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Commissioner for Patents

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maintenance fee notification						• .				
		Block I for any change of address)	Fe pa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
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LEFFERT JAY	& POLGLAZE.	P.A.	Т 1	Cel pereby certify that th	rtificate of Mai	ling or Transr	nission denocited with the United			
P.O. BOX 581009			St	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
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MINNEAPOLIS, MN 55458-1009				transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)						
		(Signature)								
							(Date)			
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.			
10/696,971	10/696,971 10/30/2003		Giovanni Naso		400.210US01		8500			
TITLE OF INVENTION: D	OATA COMPRESSIO	N READ MODE FOR M	MEMORY TESTING							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTA	L FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400	\$300	\$0		\$1700	07/05/2007			
EXAMINI	ER	ART UNIT	CLASS-SUBCLASS							
KERVEROS, J.	AMES C	2138	714-718000	_						
1. Change of correspondenc CFR 1.363).		(4)	2. For printing on the			Leffe	rt Jay &			
Change of correspond Address form PTO/SB/12	lence address (or Chai 22) attached	nge of Correspondence	or agents OR, alternat	matively, Polalaza PA						
"Fee Address" indicat			(2) the name of a sing	le firm (having as a	member a	2 10191	aze, ik			
PTO/SB/47; Rev 03-02 of Number is required.	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.									
3. ASSIGNEE NAME AND	RESIDENCE DATA	TO BE PRINTED ON T	THE PATENT (print or ty	rpe)	·					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Micron Technology, Inc. Boise, ID										
Please check the appropriate assignee category or categories (will not be printed on the patent):										
4a. The following fee(s) are s	submitted:	4b	. Payment of Fee(s): (Ple		y previously p	aid issue fee sl	hown above)			
Issué Fee	11									
Rublication Fee (No sr	nail entity discount pe	ermitted)	Payment by credit car	rd. Form PTO-2038	is attached.					
Advance Order - # of	Copies		The Director is hereby overpayment, to Depo	y authorized to chargosit Account Numbe	ge the required	fee(s), any defi (enclose an	ciency, or credit any extra copy of this form).			
5. Change in Entity Status (		,			301375					
a. Applicant claims SM			b. Applicant is no lon	ger claiming SMAL	L ENTITY stat	tus. See 37 CFI	R 1.27(g)(2).			
NOTE: The Issue Fee and Pu interest as shown by the record	blication Fee (if requires of the United State	ired) will not be accepted es Patent and Trademark	from anyone other than to Office.	he applicant; a regis	stered attorney of	or agent; or the	assignee or other party in			
Authorized Signature	Senveth	W. Boli		Date July	, 2 <b>,</b> 200	)7				
Typed or printed name	Kenneth W	. Bolvin		Registration No	o. <u>34,125</u>	5				
This collection of information an application. Confidentialits submitting the completed applications and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1- Under the Paperwork Reduction	y is governed by 33 collication form to the I for reducing this burd ia 22313-1450. DO 1 450.	J.S.C. 122 and 37 CFR I USPTO. Time will vary of en, should be sent to the NOT SEND FEES OR C	.14. This collection is est depending upon the indiv Chief Information Office OMPLETED FORMS TO	imated to take 12 m ridual case. Any corer, U.S. Patent and 1 D THIS ADDRESS.	ninutes to comp nments on the Frademark Offic SEND TO: Co	lete, including amount of time ce, U.S. Depar ommissioner fo	gathering, preparing, and e you require to complete trent of Commerce, P.O. or Patents, P.O. Box 1450,			

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	7590 04/03 & POLGLAZE,	lock 1 for any change of address) $5/2007$	re pa ha	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	D	ATTORNEY DOCKET NO	(Date)		
10/696,971					ATTORNEY DOCKET NO.	CONFIRMATION NO.		
TITLE OF INVENTION:		N READ MODE FOR M	Giovanni Naso IEMORY TESTING		400.210US01	8500		
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nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/05/2007		
EXAMIN	IER	ART UNIT	CLASS-SUBCLASS					
KERVEROS,	JAMES C	2138	714-718000	_				
(A) NAME OF ASSIGN	or "Fee Address" or more recent) attached RESIDENCE DATA as an assignee is identing 37 CFR 3.11. Complete	Indication form ed. Use of a Customer  TO BE PRINTED ON 7 fied below, no assignee letion of this form is NO  Inc.	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY BOISE	pe) patent. If an assigner assignment.  and STATE OR Co.	member a 2 Polg es of up to no name is 3 es identified below, the country)	ert Jay & laze, PA document has been filed for		
4a. The following fee(s) are  Isoné Fee  Rublication Fee (No s  Advance Order - # of  5. Change in Entity Status  a. Applicant claims SI  NOTE: The Issue Fee and Printerest as shown by the reco	mall entity discount per f Copies (from status indicated MALL ENTITY status	above) . See 37 CFR 1.27.	A check is enclosed.  Payment by credit car  The Director is hereby overpayment, to pepo	rd. Form PTO-2038  y authorized to charg sit Account Number ger claiming SMAL	ge the required fee(s), any der501373_ (enclose a	eficiency, or credit any an extra copy of this form).		
Authorized Signature  Typed or printed name  This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-	Kenneth W  In is required by 37 CF ty is governed by 35 U plication form to the I for reducing this burd in a 22313-1450. DO 1	D. Bol- Bolvin		Date July Registration No	2, 2007 5. 34,125			
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